SPCC PLAN CHECKLIST

Date of Investigation: July 17, 1980 Time of Investigation 0905

1) Facility Name: Standard Chlorine Chemical Co., Inc.
1a) Owner: Same as 1.
1b) Operator: Same as 1.
2) Location 1035 Belleville Turnpike Kearny, N.J. 07032
1c) Telephone: 201-227-4443
3) Classification of facility: Mnfctng. Types of Oil: #2 Oil
3.5) Is certified SPCC plan available: Yes #4 Oil
4) Nearest navigable water: Hackensack River
5) Spill history indicated (for previous 12 months): None indicated
6) Responsible official: Mr. Conahan
7) Management official: Milton P. Davis, V.P.
8) P.E. certification: Edna Zdenek Date: July 1975
9) Does plan consider:

a. Prediction of potential spills Yes
b. Facility drainage.....
c. Topo maps.....
d. Containment of bulk storage....
e. Facility for transfer operation
f. Proper security.....
g. Inspection & records procedure
h. Training.....

9.5) Implementation
10) Does plan require construction of additional facilities? No
If so, is it discussed in plan (including schedule)
Construction complete
11) Storage capacity: (Total) 30,000 gallons 11a) Above grade X
11b) Below grade
12) Number of hours facility is manned: 24 hours/7days
13) NPDES Permit No. NJ0001856
14) Coast Guard Manual N/A
15) Operator's Comments:

General Appraisal:

Recommendation: Plan needs updating and recertification.

Signature of Investigator: Kerry T. Webster

Signature of Operator/Owner: July 18, 1980

332766

Standard Chlorine &
Chemical Co., Inc.
WASTE LAGOON

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION: II | SITE NUMBER (to be assigned by HQ):

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition *(Section II)*. File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force *(EN-335)*; 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME	B. STREET (or other identifier)		
Standard Chlorine Chemical Co., inc.	1035 Belleville Turnpike		
C. CITY	**D. STATE**	**E. ZIP CODE**	**F. COUNTY NAME**
Kearny	N.J.	07032	Essex

G. SITE OPERATOR INFORMATION

1. NAME	2. TELEPHONE NUMBER		
Standard Chlorine Chemical Co., Inc.	201-227-4443		
3. STREET	**4. CITY**	**5. STATE**	**6. ZIP CODE**
1035 Belleville Turnpike	Kearny	N.J.	07032

H. REALTY OWNER INFORMATION *(if different from operator of site)*

1. NAME	2. TELEPHONE NUMBER	
N/A		
3. CITY	**4. STATE**	**5. ZIP CODE**

I. SITE DESCRIPTION
Manufacturing and Repackaging

J. TYPE OF OWNERSHIP
☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION *(complete this section last)*

A. ESTIMATE DATE OF TENTATIVE DISPOSITION *(mo., day, & yr.)*	B. APPARENT SERIOUSNESS OF PROBLEM
Unknown	☐ 1. HIGH ☒ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE *(mo., day, & yr.)*
Kerry T. Webster	201-225-9656	18 Jul 80

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE	4. TELEPHONE NO. *(area code & no.)*
Kerry T. Webster	Biologist	201-225-9656
3. ORGANIZATION		
Ecology and Environment, Inc.		

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
G. Tawadros	U.S.E.P.A. ER&HMI Branch	201-321-6648

C. SITE REPRESENTATIVES INTERVIEWED *(corporate officials, workers, residents)*

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
M.P. Davis	V.P. 201-227-4443	Same as I-G above
Mr. Conahan	SPCC officer	same as above

Continue On Reverse

Continued From Front

INSPECTION INFORMATION (continued)

D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Standard Chlorine	201-227-4443	1035 Belleville Turnpike	Naphthalene
		Kearny, N.J. 07032	residues

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
N/A			

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
N/A		

G. DATE OF INSPECTION (mo., day & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: (credentials must be shown in all cases)
July 17, 1980	0905	[X] 1. PERMISSION [ ] 2. WARRANT

J. WEATHER (describe)

Cloudy, intermittent rain, 78 degrees F

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER		No Samples taken	
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
None taken		

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS: [X] a. GROUND [ ] b. AERIAL

2. PHOTOS IN CUSTODY OF: U.S.E.P.A.

D. SITE MAPPED?

[ ] YES. SPECIFY LOCATION OF MAPS: No

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

V. SITE INFORMATION

A. SITE STATUS

[ ] 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

[ ] 2. INACTIVE (Those sites which no longer receive wastes.)

[ ] 3. OTHER (specify): _____ (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

[ ] 1. NO [X] 2. YES (specify generator's four-digit SIC Code): Unknown

C. AREA OF SITE (in acres)

≈ 20 Acres

D. ARE THERE BUILDINGS ON THE SITE?

[ ] 1. NO [XX] 2. YES (specify):

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER
	1. RAIL
	2. SHIP
	3. BARGE
	4. TRUCK
	5. PIPELINE
	6. OTHER (specify):

X'	B. STORER
X	
	1. PILE
XX	2. SURFACE IMPOUNDMENT
	3. DRUMS
	4. TANK, ABOVE GROUND
	5. TANK, BELOW GROUND
	6. OTHER (specify):

X'	C. TREATER
	1. FILTRATION
	2. INCINERATION
	3. VOLUME REDUCTION
	4. RECYCLING/RECOVERY
	5. CHEM./PHYS./TREATMENT
	6. BIOLOGICAL TREATMENT
	7. WASTE OIL REPROCESSING
	8. SOLVENT RECOVERY
	9. OTHER (specify):

X'	D. DISPOSER
	1. LANDFILL
	2. LANDFARM
	3. OPEN DUMP
	4. SURFACE IMPOUNDMENT
	5. MIDNIGHT DUMPING
	6. INCINERATION
	7. UNDERGROUND INJECTION
	8. OTHER (specify):

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

[ ] 1. STORAGE [ ] 2. INCINERATION [ ] 3. LANDFILL [X] 4. SURFACE IMPOUNDMENT [ ] 5. DEEP WELL

[ ] 6. CHEM/BIO/PHYS TREATMENT [ ] 7. LANDFARM [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

[X] 1. LIQUID [ ] 2. SOLID [ ] 3. SLUDGE [ ] 4. GAS

B. WASTE CHARACTERISTICS

[X] 1. CORROSIVE [ ] 2. IGNITABLE [ ] 3. RADIOACTIVE [ ] 4. HIGHLY VOLATILE

[X] 5. TOXIC [ ] 6. REACTIVE [ ] 7. INERT [ ] 8. FLAMMABLE

[ ] 9. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

Naphthalene residues

Continue On Reverse

Continued From Front

WASTE RELATED INFORMATION (continue

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT: Unknown	AMOUNT:	AMOUNT:	AMOUNT: 10,000	AMOUNT:	AMOUNT:
UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE: gallons	UNIT OF MEASURE:	UNIT OF MEASURE:
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY, PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER(specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER(specify):	X (3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER(specify): Chemical residues			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER(specify):
			(6) CYANIDE	(6) OTHER(specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER(specify)		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X') a. SOLID	b. LIQ.	c. VAPOR	3. TOXICITY (mark 'X') a. HIGH	b. MED.	c. LOW	d. NONE	4. CAS NUMBER	5. AMOUNT	6. UNIT
Naphthalene		X							10,000	gal.
Sludge	X								unknown	

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

Continue On Page 5

Continued From Page 4

III. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☐ D. CONTAMINATION OF WATER SUPPLY

☐ E. CONTAMINATION OF FOOD CHAIN

☒ F. CONTAMINATION OF GROUND WATER

Possible leaching of chemical into groundwater

☒ G. CONTAMINATION OF SURFACE WATER

Possible leaching through dike wall into Hackensack River.

Continue On Reverse

Continued From Front

HAZARD DESCRIPTION (continued)

☐ H. DAMAGE TO FLORA/FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☐ L. CONTAMINATION OF SOIL

☐ M. PROPERTY DAMAGE

Continue On Page 7

Continued From Page 6

VII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

☐ P. SEWER, STORM DRAIN PROBLEMS

☐ Q. EROSION PROBLEMS

☐ R. INADEQUATE SECURITY

☐ S. INCOMPATIBLE WASTES

Continue On Reverse

VIII. HAZARD DESCRIPTION *(continued)*

☐ T. MIDNIGHT DUMPING

☐ U. OTHER *(specify)*:

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE *(specify units)*
1. IN RESIDENTIAL AREAS				
2. IN COMMERCIAL OR INDUSTRIAL AREAS				
3. IN PUBLICLY TRAVELLED AREAS				
4. PUBLIC USE AREAS *(parks, schools, etc.)*				

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER *(specify unit)*	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
10 Feet	Unknown	Unknown
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY** *(specify unit of measure)*	**F. DIRECTION TO DRINKING WATER SUPPLY**
Unknown	Unknown	Unknown

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS ☐ 2. COMMUNITY *(specify town)*: > 15 CONNECTIONS _____

☐ 3. SURFACE WATER ☐ 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')

I. RECEIVING WATER

1. NAME: Hackensack River

☐ 2. SEWERS ☒ 3. STREAMS/RIVERS ☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☒ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK (specify below)	'X'	C. OTHER (specify below)
	1. SAND			X	Unconsolidated fill
	2. CLAY				
	3. GRAVEL				

XIII. SOIL PERMEABILITY

☒ A. UNKNOWN ☐ B. VERY HIGH (100,000 to 1000 cm/sec.) ☐ C. HIGH (1000 to 10 cm/sec.)

☐ D. MODERATE (10 to .1 cm/sec.) ☐ E. LOW (.1 to .001 cm/sec.) ☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☐ 1. YES ☐ 2. NO 3. COMMENTS: Unknown

H. DISCHARGE AREA

☐ 1. YES ☐ 2. NO 3. COMMENTS: Unknown

I. SLOPE

1. ESTIMATE % OF SLOPE: Less than 10%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

J. OTHER GEOLOGICAL DATA

Area comprised of fill material

Continue On Reverse

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X') 1. YES	2. NO	3. UNKNOWN
NPDES	N.J.	NJ0001856	Unknown	July 1983			X

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

[X] NONE [ ] YES (summarize in this space)

No indication of past regulatory action.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition *(Section II)* information on the first page of this form.

SURFACE IMPOUNDMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. TYPE OF IMPOUNDMENT

Lagoon

2. STABILITY/CONDITION OF EMBANKMENTS

Unknown stability, dike material appears porous

3. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc.)*

[X] YES [ ] NO Erosion of dike walls

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

[ ] YES [X] NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

[X] YES [ ] NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

[ ] YES [X] NO

7. IMPOUNDMENT HAS LINER SYSTEM

[ ] YES [X] NO

7a. INTEGRITY OF LINER SYSTEM CHECKED

[ ] YES [X] NO

7b. FINDINGS

8. SOIL STRUCTURE AND SUBSTRUCTURE

Unconsolidated fill material.

9. MONITORING WELLS

[ ] YES [X] NO

10. LENGTH, WIDTH, AND DEPTH

LENGTH 300 ft WIDTH 80 ft DEPTH 3 ft

11. CALCULATED VOLUMETRIC CAPACITY

72,000 cu.ft.

12. PERCENT OF CAPACITY REMAINING

72,000 cu.ft.

13. ESTIMATE FREEBOARD

2-3 ft.

14. SOLIDS DEPOSITION

[X] YES [ ] NO

15. DREDGING DISPOSAL METHOD

None undertaken

16. OTHER EQUIPMENT

Comment: Lagoon has been inactive for 20 years, however, it has not been maintained for at least that amount of time.